


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2004 8:00 am
Secretary of State

04-23-2004 90207 015 ****61.25

DOCUMENT # 724774

1. Entity Name
THE BETHANY BAPTIST CHURCH INC. OF ST. AUGUSTINE



Principal Place of Business 5465 C.R. 208 ST AUGUSTINE, FL 32092 US	Mailing Address P.O. BOX 161 ELKTON, FL 32033 US
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54039086



02232004 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1881576	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**BROWN, STEVEN D
 4011 BARBARA TERRACE
 ST AUGUSTINE, FL 32086**

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
 Due by May 1, 2004**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST ESKEW, DEBRA 1950 SHERIDAN DR. SAINT AUGUSTINE, FL 32084
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TAYLOR, JAMES H. 8658 HAMMOND FOREST BLVD. JACKSONVILLE, FL 32221
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T TOUZET, FREDRICK 1820 LIGHTSEY RD. SAINT AUGUSTINE, FL 32084
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GOWELL, EDMAN 10545 CARPENTER AVE. HASTINGS, FL 32145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BROWN, RONALD 5320 CHURCH ROAD SAINT AUGUSTINE, FL 32092
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ESKEW, WES 1950 SHERIDAN DR SAINT AUGUSTINE, FL 32084

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Steven D. Brown / **STEVEN D. BROWN** Date: 4/20/04 Daytime Phone #: (904) 825-3568

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR